		1. DATE SUBMITTED -1/18/00 2/02/00						
(implementation detail at (301) 713-1373.	This form is in three parts. Submitters must complete unshaded blocks in Part A and as much of Part B as possible. WSH will complete Part C (implementation details). If there is no specific required change date, enter 60 days from date submitted. Address questions to NWS Change Management at (301) 713-1373. Submit change requests to the NWSRC mailbox (External: NWSRC@noaa.gov).							
2. ORIGINATOR OFF APO	FICE 3. SUBN Name: \	BMITTING AUTHORITY Ward Seguin g Code: W/APO1		CHNICAL INDIVIDUAL PO1	5. ORIGINATOR TRACKING NUMBER RC_APO28			
6. SYSTEMS AFFECTED BY CHANGE DATA PRODUCTS (Complete Data Prod ASOS AWIPS CRS NEXRAD DTHE				ucts Supplement) R (specify)	7. WSH TRACKING NUMBER NWS 544 2/2/00			
	8. TITLE OF CHANGE Modify software to allow more time for ROSA cooperators to enter observational data.							
9. TYPE OF CHANGE HARDWARE X SOFTWARE DOCUMENTATION ONLY				10. SITES AFFECTED (Attach Part B, Page 2, if needed) BTV (Burlington, Vermont). See attachment A1A for details.				
11. STATEMENT OF REQUIREMENT, PROBLEM, OR DEFICIENCY OF EXISTING SYSTEM (Include problem report reference numbers.) ROSA software does not allow sufficient time for observers to enter their data (See attachment A1B for the DR list).								
12. KNOWN OR PROPOSED SOLUTION (Include source and description of new features or data products.) Modify the existing software (through Release 4.2.6) to add more time for the ROSA cooperators to enter their observational data. This change has been included as part of R4.3 and tested through SwIT, SIT, and SyAT (see Attachment A1C for installation instructions).								
13. ALTERNATE SOL None.	13. ALTERNATE SOLUTIONS None.							
14. REQUIRED CHANGE DATE 18 January 2000	GE DATE This problem needs to be resolved as soon as possible, since it has impacted site operations by causing the sites to lose valuable							
			CCB/PMC/CMB DE	CISION				
16. DECISION AUTHORITY LEVEL		☐ CCB LEVE	EL ONLY	PMC or NWS CMB DECISION REQUIRED				
17. CCB LEVEL DECISION		☐ APPROVE	VED MEND APPROVAL	SIGNATURE DATE SIGNED				
		D DISAPPR						
18. PMC OR NWS CI			HEN PIVIC OF INVVS	CMB DECISION REQU SIGNATURE				
		☐ APPROVE		TE CIONED				
		DISAPPRO	OVED	DATE SIGNED				

NWSRC Form 1001, 9/15/99

1. ORIGINATOR TRACKING NUMBER NWS CHANGE FORM **PART B** RC APO28 All RC/ECP submissions must also address the following information. Indicate if any areas are unknown or do not 2. WSH TRACKING NUMBER apply. State why information is unknown and when it will be available. Attach extra pages if necessary, nws544 referencing each applicable subject. FUNDING INFORMATION 3. SOURCE OF 4. TOTAL COST Estimate costs and indicate known sources of funding. (Include travel time, installation time, administrative **FUNDING** time, and software development time when applicable.) 5. DEVELOPMENT COSTS (Estimate development costs) KMOD **AMOUNT** This cost is associated with R4.3 development. BASE \$ 6. OPERATIONAL TEST AND EVALUATION COSTS (Estimate test and evaluation costs) BASE AMOUNT \$0 N/A 7. PRODUCTION COSTS (Include acquisition, kit proofing, spares, delivery, and documentation costs) KMOD AMOUNT BASE \$0 8. COMMUNICATIONS SERVICE/CIRCUITS COSTS (Include installation and recurring costs) **AMOUNT** N/A \$0 KMOD **AMOUNT** 9. IMPLEMENTATION SUPPORT COSTS (Include travel, installation, and administrative costs) **BASE** This change will be pushed to BTV by the NCF as directed by the SST 9A. LIFE CYCLE SUPPORT COSTS (Less communications service/circuits) KMOD **AMOUNT** Contractor (PRC) - NCF Operations Unknown SUPPORTING INFORMATION AND SCHEDULES Provide detailed information needed to implement the requested change. 10. DEVELOPMENT STATUS/SCHEDULE (Major milestones such as Start, Beta 11. PRODUCTION STATUS/SCHEDULE (Major milestones such as Test, and OT&E) Solicitation, Contract Start Date, Delivery Date, Kit Proofing, etc.) N/A 12. IMPLEMENTATION/RETROFIT SCHEDULE 13. FACILITY INFORMATION (Attach facility drawings/plans.) N/A 14. COMMUNICATIONS INSTALLED (Type required, who will order, and 15. COMMUNICATIONS SERVICE/CIRCUITS TO BE REMOVED associated hardware required; attach Part B, Page 2, if needed.) N/A 16. REQUIRED CLEARANCES, WAIVERS, AND LICENSES (Include person or 17. COORDINATION OF CHANGE WITH OTHER CHANGES organization responsible for obtaining each) Sites need to have R4.2 already installed. N/A 18. PHYSICAL ITEMS AND DOCUMENTS AFFECTED (Include part, serial, and 19. STAFF RESOURCE IMPACTS (Skills and workload impact on document numbers. Attach Part B, Page 2, if needed.) maintainers, operators, and managers.) No recurring workload impacts. N/A 20. LOGISTICS IMPACTS (Include facilities, maintenance, training, and support 21. OPERATIONAL IMPACTS (Include continuity and back up needs equipment impacts.) and plans.) N/A N/A 22. ADDITIONAL MAJOR CHANGE ACTIVITIES (Include who will accomplish each of them and staff hours required.) SST will coordinate with BTV to push the change to the site. SST and APO will be available to the site for assistance.

NWS CHANGE FORM PART B - PHYSICAL ITEM AND DOCUMENT IMPACT MATRIX SUPPLEMENT					1. ORIGINATOR TRACKING NUMBER RC_APO28				
This information is required prior to publication of Engineering Modification Notes and Software Release Notes. List physical items to be replaced and specify any changes in related documentation. (Submitters should complete this information, if known. WSH will assist.)					2. WSH TRACKING NUMBER				
3. ITEM NAME, CIRCUIT TYPE, SOFTWARE VERSION, OR SITE LOCATION	4. REMOVE REPLACE MODIFY	5. SUPERSEDED ITEM OR CONFIGURATION		6. SUPERSEDING PART NUMBER OR NEW	7. DOC TYPE	8. SUPERSEDED DOCUMENT		9. SUPERSEDING DOCUMENT	
		A. PART NUMBER OR CONFIGURATION	B. SERIAL NUMBER(S) OR COMMENTS	CONFIGURATION		A. IDENTIFIER	B. REV	A. IDENTIFIER	B. REV
N/A									
									$\vdash \vdash$
									igwdown
									\square
									\blacksquare
									\blacksquare
									\blacksquare
									$oxed{oxed}$
									H

-1110 0111105 50014		1. ORIGINA RC_APO2	TOR TRACKING NUMBER			
NWS CHANGE FORM						
PART C WSH is responsible for Part C, but submitters may complete sections that would help cla	arify the change	2 WSH TR	ACKING NUMBER			
requirement or the necessary implementation actions.	arify the change		ACKING NOWIELK			
		NWS 544				
3. CCB COST EVALUATION						
NWS COST \$ FAA COST \$ DOD COST \$ OTHER AGENCY COST \$ TOTAL COST \$ (SPECIFY)						
4. IMPLEMENTATION DOCUMENTS REQUIRED						
☐ Engineering Modification Note ☐ Software Release Notes ☐ Other Document (Specify)						
ADDITIONAL IMPLEMENTATION INSTRUCTIONS (e.g., Implementation schedule, parts documentation required, and status reporting instructions.) Include documentation, data completion of the implementation activity.	shipping instruction a input, notification	s, equipment disposal vehicle, or specific ac	procedures, additional tion step required to verify			
	6. REQUIRED COMPLETION DATE	7. RESPONSIBLE PERSON AND OFFICE	8. DOCUMENT OR ACTION REQUIRED TO VERIFY COMPLETION			
A. Coordinate implementation schedule with selected sites through SST	17 Jan 00	Thigpen/SST, W/APO3	N/A			
B. NCF Push the change to selected sites as directed by SST	18 Jan 99	Thigpen/SST, W/APO3	See item C			
C. Ensure this change is reported to the Weather Service Headquarters (WSH) through the Engineering Management Reporting System (EMRS) according to the instructions in Engineering Hanbook number 4, part 2. Record this RC number (NWS529) in Block 17a of the EMRS report.	22 Feb 00	Finke, W/CR41x4 Machado, W/ER41x4 Garcia, W/SR41x4 Fahy, W/WR411				
D. Ensure the appropriate WSH management information systems and configuration management data bases are updated to reflect these changes.	14 Mar 00	Michelle deTommaso W/OSO113				

NWSRC Form 1001, 9/15/99